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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

Please type or print in ink.

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
STATEMENT OF ECONOMIC INTERESTS



12 MAR 25 2012
COVER PAGE 5

RECEIVED

Date Received
JAN 29 2012

MARIN COUNTY
ELECTIONS

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

RICE

CATHERINE

LLOYD

1. Office, Agency, or Court

Agency Name

MARIN COUNTY BOARD OF SUPERVISORS MEMBER

Division, Board, Department, District, if applicable

Your Position

DISTRICT 2

► If filing for multiple positions, list below or on an attachment.

Agency: SEE ATTACHMENT

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ Multi-County

FLAMENGA CONTRACOSTA, MARIN,
NAPA, SAN FRANCISCO, SAN MATEO,
SANTA CLARA, SALADO, SONOMA

☐ City of

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☒ County of

MARIN

☒ Other

SEE ATTACHMENT

3. Type of Statement (Check at least one box)

☒

Annual: The period covered is January 1, 2011, through December 31, 2011.

-or-

The period covered is _____ through December 31, 2011.

☐

Assuming Office: Date assumed _____

☐

Leaving Office: Date Left _____ (Check one)

☐ The period covered is January 1, 2011, through the date of leaving office.

☐

The period covered is _____ through the date of leaving office.

☐

Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☒

Schedule A-1 - Investments - schedule attached

☐

Schedule A-2 - Investments - schedule attached

☐

Schedule B - Real Property - schedule attached

☒

Schedule C - Income, Loans, & Business Positions - schedule attached

☐

Schedule D - Income - Gifts - schedule attached

☐

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

Date Signed

1-23-12

(month, day, year)

Signature

California Form 700 for year 2012

**Re: Catherine Lloyd Rice, Marin County Board of Supervisors
(board member)**

Other Boards and Commissions:

Gateway Improvement Authority (Member)
Gateway Refinancing Authority (Member)
Marin County Capital Improvements Financing Authority (Member)
Marin County Flood Control & Water Conservation District (Member)
Marin County Housing Authority (Director)
Marin County Parks and Open Space (Director)
Marin County Redevelopment Agency (Director)
Marin County Transit District (Director)
Mental Health Board (Member)
Transportation Authority of Marin (TAM-Director)
Bay Area Air Quality Management District (BAAQMD)
Employee Recognition Committee
FireSafe Marin
Marin County Children and Families Commission
San Rafael Sanitation District Board of Directors
TAM Greenbrae Area Subcommittee

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

CATHERINE LLOYD RICE

NAME OF BUSINESS ENTITY
EXXON MOBIL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
ENERGY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☒ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/11
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/11
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
COLGATE - PALMOLIVE

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☒ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/11
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/11
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
GENERAL ELECTRIC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☒ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/11
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$100,001 - \$1,000,000
☐ \$10,001 - \$100,000
☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/11
 ACQUIRED DISPOSED

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name CATHERINE WOTTS RICE

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>COUNTY OF MARIN</u>	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) <u>3501 Cwic Center Dr. #332</u>	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>GOVERNMENT</u> SAN RAFAEL CA 94903	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
<input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	<input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
<input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ (Describe)	<input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ (Describe)

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		

BUSINESS ACTIVITY, IF ANY, OF LENDER		

HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Real Property _____	
<input type="checkbox"/> \$10,001 - \$100,000	_____ Street address	
<input type="checkbox"/> OVER \$100,000	_____ City	
	<input type="checkbox"/> Guarantor _____	
	<input type="checkbox"/> Other _____	
	(Describe)	

Comments: _____